IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application) PATENT APPLICATION
Inventor:	Hem P. Takiar)
Application No.:	Unknown)
Filed:	Herewith)
Title: PERIPHERA	L CARD WITH HIDDEN TEST PINS) <u>Customer No. 28554</u>
	POWER OF ATTORNEY	
Commissioner for Pa P.O. Box 1450 Alexandria, VA 223	atents	
MARCUS, Brian I. (agents to prosecute t	point DeNIRO, Kirk J. (Reg. No. 35,854), M (Reg. No. 34,511), and VIERRA, Larry E. (Reg. the application identified above, and to transact Office connected therewith.	g. No. 33,809), as our attorneys or
Please direct	all telephone calls and correspondence for the	above-identified application to:
	Burt Magen, Esq. Vierra Magen Marcus Harmon & DeNiro LI 685 Market Street, Suite 540 San Francisco, California 94105 Telephone: 415.369.9660, Facsimile: 415.3	
patent application. I establishing chain of which:	poration is the assignee of the entire right, title, the undersigned, declare that I have reviewed of title to the patent application identified above is filed for recordation herewith; or was recorded at Reel, Frame; or has been sent for recordation under separate	copies of the documentary evidence from the inventors to the assignee r
The undersig	med is authorized to sign this document on beh	nalf of the assignee.
Date:	Charles VanOrden	
Name:	Charles VanOrden	
	Vice President & General Counsel	

Attorney Docket No.: SAND-01004US0 sand/1004/1004.poa-001

PTO/SB/01 (10-01)

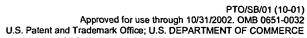
Approved for use through 10/31/2002. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

1221

DEGLADATION FOR UTUITY OR	Att rney Docket Number	SAND-01004US0	
DECLARATION FOR UTILITY OR DESIGN	First Named Inventor	Takiar	
PATENT APPLICATION	COMPLETE IF KNOWN		
(37 CFR 1.63)	Application Number		
Declaration Declaration	Filing Date		
Submitted OR Submitted after Initial with Initial	Art Unit		
Filing (37 CFR 1.16 (e)) required)	Examiner Name		

(Filing	(37 CFR 1.16 (e)) required)	Examiner Name					
Γ	As the below named inventor, I hereby declare that:							
	My residence, mailing address, and citizenship are as stated below next to my name.							
ļ	I believe I am the original and first inventor of the subject matter which is claimed and for which a patent is sought on the invention entitled:							
	PERIPHERAL CARD WITH HIDDEN TEST PINS							
		(Title of the In	nyontion)					
	the specification of which	(Tibe of the in	iv e ndon)					
is attached hereto								
	OR was filed on (MM/DD/YYYY) as United States Application Number or PCT International							
	Application Number	and was amende	ed on (MM/DD/YYYY)		(if applicable).			
I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.								
I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.								
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.								
	Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES NO			
l	Additional foreign application number	mbers are listed on a supple	mental priority data sheet F	PTO/SB/02B attach	ned hereto:			

[Page 1 of 2]



U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION — Utility or Design Patent Application

Direct all correspondence to: Customer Number or Bar Code Label OR Correspondence address below						
Burt Magen, Vierra Magen Marcus Harmon & DeNiro LLP						
685 Market Street, Suite 540 Address						
San Francisco		California state	_{ZIP} 94105			
USA 415.369		69.9660 	415.369.9665 Fax			
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.						
NAME OF SOLE OR FIRST INVENTOR	R:	as been filed for this unsign	ned inventor			
Given Name Hem P. Family Name Takiar or Surname						
Inventor's Signature Punch 7/14/03						
Sunnyvale Residence: City	California State	a USA Country	USA Citizenship			
1544 Blackfoot Drive Mailing Address						
Fremont	California State	a _{zip} 94539	USA Country			
NAME OF SECOND INVENTOR:	A petition ha	s been filed for this unsigne	ed inventor			
Given Name (first and middle [if any])		Family Name or Surname				
Inventor's Signature Date						
Residence: City	State	Country	Citizenship			
Mailing Address						
City	State	ZIP	Country			
Additional inventors are being named on the	supplemental Addition	onal Inventor(s) sheet(s) PTO/SB/	02A attached hereto.			